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CONFIRMATION NO. 5515

<b>SERIAL NUMBER</b> 09/435,657	<b>FILING OR 371(c) DATE</b> 11/08/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2667	<b>ATTORNEY DOCKET NO.</b> 19447-P001CI	
<b>APPLICANTS</b> JOHN L. TOMICH, COPPELL, TX; MICHAEL J. VONAHNEN, DALLAS, TX; MICHAEL B. SCHEEHAN, PROSPER, TX					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/02/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged		Examiner's Signature <i>[Signature]</i>		Initials	
<b>ADDRESS</b> JACKSON WALKER LLP 2435 NORTH CENTRAL EXPRESSWAY SUITE 600 RICHARDSON, TX 75080					
<b>TITLE</b> PHOTONIC HOME AREA NETWORK					
<b>FILING FEE RECEIVED</b> 1087	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/435,657	FILING DATE 11/08/99	CLASS 370	GROUP ART UNIT 2739	ATTORNEY DOCKET NO. 19447-P001CI
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**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

No pg

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

No pg

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/02/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 10	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>pg</u> Examiner's Initials _____ Initials _____				

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TITLE	PHOTONIC HOME AREA NETWORK
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FILING FEE RECEIVED \$445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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